

P140000036149

(Requestor's Name)

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(Address)

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TALLAHASSEE, FLORIDA

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I ALBRITTON

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FAMCO/FAMILY SERVICE COMPANY  
(Name of Corporation)

**DOCUMENT NUMBER:** P14000036149

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID KLINGELSMITH, SR  
(Name of Person)

FAMCO/FAMILY SERVICE COMPANY  
(Name of Firm/Company)

5701 SE LAMAY DR  
(Address)

STUART, FL 34997  
(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID KLINGELSMITH, SR at (772) 933-9402  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, DAVID E. KLINGELSMITH, JR, hereby resign as PRESIDENT  
(Title)

of FAMCO/FAMILY SERVICE COMPANY,  
(Name of Corporation)

P14000036149, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

EFFECTIVE DECEMBER 1, 2015

  
(Signature of resigning officer/director)

**FILED**  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314